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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/563,655	
	<b>Filing Date</b>	January 5, 2006	
	<b>First Named Inventor</b>	J. Christopher Anderson	
	<b>Group Art Unit</b>	1652	
	<b>Examiner Name</b>	Gebreyesus, Kagnew, H	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	54A-000410US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> PTO-1449 Form	<input type="checkbox"/> Interview Summary
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Cited Reference	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Copy of PCT Search Report	<input type="checkbox"/> Request for Corrected Filing receipt
<input type="checkbox"/> Amendment and Request for Reconsideration	<input checked="" type="checkbox"/> Copy of EP Search Report	<input type="checkbox"/> Copy of Filing Receipt – marked up
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Receipt Acknowledgement Postcard	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<b>Authorization to Charge Deposit Account</b> Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b>	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jonathan Alan Quine, Reg. No. 41,261, Quine Intellectual Property Law Group, P.C.
Signature	
Date	June 13, 2008

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Typed or printed name	Kimberly Cheung		
Signature		Date	June 13, 2008



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QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.

By: Kimberly Cheung  
Kimberly Cheung

Appl. No. : 10/563,655  
Applicant : J. Christopher Anderson, et al.  
Filed : January 5, 2006  
TC/A.U. : 1652  
Examiner : Gebreyesus, Kagnew, H

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Commissioner for Patents  
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Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR § 1.97 and § 1.98**

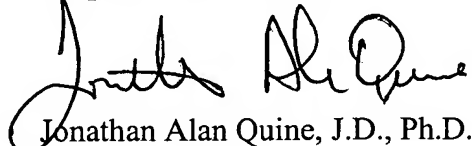
Sir:

The references cited on attached form PTO-1449 are being called to the attention of the Examiner. A copy of the reference is enclosed. Also, enclosed is a copy of the European Search Report for corresponding European Application No. 04777877.4 It is respectfully requested that the cited information be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and reference cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement, since it is being submitted prior to the first Office Action on the merits per 37 CFR 1.97(b)(3). However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 50-0893. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Jonathan Alan Quine, J.D., Ph.D.  
Reg. No. 41,261

QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.  
P.O. BOX 458  
Alameda, CA 94501  
(510) 337-7871  
Fax (510) 337-7877